

12-04-00

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**PATENT**

Attorney Docket No. BON-4363

**BOX PATENT APPLICATION**  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

**NEW APPLICATION TRANSMITTAL**

Transmitted herewith for filing is the patent application of Inventor(s):  
**PETER M. BONUTTI**

For (title): **TRACHEAL INTUBINATION**

Enclosed are:

**1. Papers Required for Filing Date Under 37 CFR 1.53(b):**

122 Pages of specification  
1 Pages of Abstract  
76 Pages of claims  
14 Sheets of drawing

☒ formal  
☐ informal

In addition to the above papers there is also attached:

☒ Information Disclosure Statement  
☒ References Cited

**CERTIFICATION UNDER 37 CFR 1.10**

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date DECEMBER 1, 2000 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EF163919645US addressed to the: Commissioner of Patents and Trademarks, Washington D.C. 20231

**INELL MAHONE**

(Type or print name of person mailing paper)

(Signature of person mailing paper)

**2. Declaration or oath:**

- ☒ Enclosed (UNEXECUTED)  
☐ Not Enclosed.

**3. Language:**

- ☒ English  
☐ Non-English  
☐ A verified English translation of the  
☐ specification and claims  
☐ declaration  
is attached.

**4. Assignment:**

- ☐ An assignment of the invention to \_\_\_\_\_  
\_\_\_\_\_  
☐ is attached.  
☐ will follow.

**5. Certified Copy:**

Certified copy(ies) of application(s)

(Country)	(appln. no.)	(filed)
(Country)	(appln. no.)	(filed)
(Country)	(appln. no.)	(filed)

from which priority is claimed

- ☐ is attached  
☐ will follow

EXPRESS MAIL LABEL NO. EF163919645US

6. **Fee Calculation:**  
(Small entity filing fee is 50% normal fee)

CLAIMED AS FILED				
Number Filed		Number Extra	Rate	Basic Fee
				<b>\$355.00</b>
Total Claims	242	-20 =	222	X 9.00
				<b>1,998.00</b>
Independent Claims	24	-3 =	21	X 40.00
				<b>840.00</b>
Multiple dependent claim(s), if any +				

- ☐ Amendment canceling extra claims enclosed
- ☐ Amendment deleting multiple dependencies enclosed
- ☐ Fee for extra claims is not being paid at this time

Filing Fee Calculation \$ **3,193.00**

7. **Small Entity Statement:**

- ☒ I verify that this application is being filed by a small entity under 37 CFR 1.9 and 1.27

8. **Fee Payment Being Made At This Time:**

Enclosed:

- ☒ basic filing fee \$ **3,193.00**
- ☐ assignment recordal fee \$
- ☐ for processing an application with a specification in a non-English language \$

Total fees enclosed \$ **3,193.00**

9. **Method of Payment of Fees:**

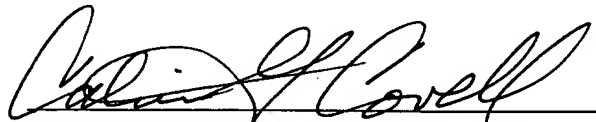
- ☒ check in the amount of \$ **3,193.00** is enclosed.
- ☒ The Commissioner is hereby authorized to charge any **DEFICIENCY** in the filing fees for this application to our **Deposit Account No. 20-0090**.

10. **Instructions As to Overpayment:**

- ☒ refund

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SIGNATURE OF ATTORNEY, Reg. No. **24,042**

**CALVIN G. COVELL**  
Type or print name of attorney

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